

No. of Vol.

COUNTY OF SAN DIEGO VOLUNTEER REPORT FORM PERIOD JULY 1, 2013 - JUNE 30, 2014

Deadline: July 18, 2014

1. **DEPARTMENT INFORMATION:**

	Department:	BOS-District 4	BOS-District 4 N/A					
	Division/Unit:	N/A						
2.	VOLUNTEER PROGRAM BENEFITS:							
	a. GENERAL VOLUNTEERS (this section should include community volunteer, student intern, groups, corporations, etc).							
	No. of Vol.	1 Hours	160 - X	\$22.55	\$3,608.00			
	Types of work perfor	med by GENERAL VOLU	NTEERS in this ca	ategory:				
	Policy research and v	vriting, public outreach act	ivities, event plann	ing and execution	ı .			
					•			
	•							
	b. INSTITUTIONAL PIC/RETC, GAIN, et	VOLUNTEERS (this sect	ion should include	honor camp inma	ates,			

Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

X

\$22.55 =

Hours

\$0.00

c. SPECIALIZED VOLUNTEERS (this section should include utilization of Special Volunteers in positions requiring specific skills and/or expertise levels, for example, an attorney, physician, sports figure or celebrity). These specialized positions have verifiable compensation levels (VCL). If you have such a volunteer, please indicate the position, hours and compensation level

<u>Position</u>		<u>Hours</u>	X	$\underline{\text{VCL}}$	=	Dollar Benefit
						\$0.00
						\$0.00
					_	\$0.00
			,			\$0.00
						\$0.00
No. of Vol.	Total Hours	0	,	Total Val	ue =	\$0.00

Types of work performed by SPECIALIZED VOLUNTEERS in this category:

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

No. of Volunte	<u>ers</u>	<u>Hours</u>	Dollar Benefit
2a	1	160	\$3,608.00
2b. 2c,			
2C,		· · · · · · · · · · · · · · · · · · ·	
Total Vol.	1 Hours	160 Total Value	= \$3,608.00

3. DONATIONS TO VOLUNTEER PROGRAM:

(add 4a, 4b, and 4c)

4.

assign a fair market value to each and add to	the total value of the donations section.
Item Donated:	Value:
	OTAL VALUE = \$0.00
VOLUNTEER PROGRAM COSTS:	
a. Cost of supervision of volunteeers (total h	ours of direct supervision multiplied by the hourly
rate of staff person (s) directly supervising pr	* * *
Hours X Rate	= \$0.00
	of program coordination multiplied the hourly rate e coordination of staff, compiling statistics, job recognition, etc.)
Hours X Rate	= \$0.00
c. Other program costs (volunteer training m	aterials/supplies, recognition costs, etc.):
<u>Item</u>	Cost
· · · · · · · · · · · · · · · · · · ·	
TOTAL OF OTHER PROGRAM COSTS	= \$0.00
d. TOTAL OF VOLUNTEER PROGRAM (COST =

Please list all donations to the department's Volunteer program including monetary donations and <u>tangible/intangible</u> items. Items such as computers, air time, transportation, books, etc. Please

\$0.00

5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

a. Total Dollar Benefits of Volunteers, Item 2d (Page 2)

b. Total of Donations to Volunteer Program, Item 3 (Page 2)

c. Subtract Total of Program Costs, Item 4d (Page 3)

\$0.00

TOTAL PROGRAM BENEFIT

			620
552	3.6	Uð	.00
1			
200	363 CK	100	

6. RECRUITING:

Please describe your recruiting programs:

Recruiting typically invovles close relationships with universities and student programs throughout the County of San Diego, where connect possible candidates to the office. From there, interviews and vetting take place, with the best candidate for the job being chosen.

7. SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS:

Please describe any special activities and/or achievements your program was involved in during the period of this report:

8. VOLUNTEER PROGRAM GOALS FOR FISCA	${f L}$ ${f Y}{f E}$	YEAR	2014-15:
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Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:

At least 2 volunteers for the fiscall year or one long term volunteer.

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	Name of person completing report:		Sterling McHale		
	Phone: 6195315544	Mail Stop:	A-500	E-Mail:	sterling.mchale@sdcoun
	Volunteer Coordinator:	Same as abo	ove		
	Phone:	Mail Stop:		E-Mail:	
10.	DEPARTMENT CERTIF	1/09/1		7-22-	
	DEPARTMENT :	HEAD SIGNA	ATURE	DAT	T E